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T. MATTHEWS
JAN 18 2022

## **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT:	Ripplify St	Ludios, LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subm	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
		Son Roach Name of Person	
	R:PPI	Firm/Company	
		Firm/Company	
	4408 Del u	good Lane, Su	ite 26
	Panamac	City/State and Zip Code  OB BIPPLIFY M o be used for future annual report notif	32408
	E-mailaddress: (to	o be used for future annual report notif	ication)
For further information cor	ncerning this matter, please ca		
Jayson	Roach	at ( <u>850</u> ) <u>252</u> Area Code Daytime	-0707
Name of I	rerson	Area Code Dayring	, receptions was to
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	:	Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	Liability Company as it now appears on our records.)
	I Liability Company as it now appears on our records.) A Florida Limited Liability Company)
e Articles of Organization for this Limited Liabrida document number <u>L 21000415</u>	bility Company were filed on $9-21-2021$ and assigned $5950$ .
s amendment is submitted to amend the follow	ving:
If amending name, enter the new name of t	the limited liability company here:
new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applica	ble:
incipal office address MUST BE A STREET	'ADDRESS)
ter new mailing address, if applicable:	
ailing address MAY BE A POST OFFICE B	<u>(OX)</u>
If amending the registered agent and/or regent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new regist</u> <u>s here</u> :
Name of New Registered Agent:	Jayson Roach
New Registered Office Address:	Jayson Roach 4408 Delwood Lane, Snite Z6 Enter Florida street address
	B Panama City Beach Florida 32408 Zip Code
w Denistered Agent's Signature, if changing Re	existenced Agents

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Address 4408 Delwood Lone, Saite 26 Type of Action Name Title MGR Jayson Price Panama City Beach, FL 32408 DAdd 4408 Delwood Lane, Suite 26 Change AR Logan Price Panama C.+y Beach, FL 32408 DAdd **E**Remove \_\_\_\_\_ Change MGR Jayson Roach 4408 Delwood Lane DAdd Suite 26, PanamaCity DRemove Beach, FL 32408 \_\_\_ Change AR Logan Roach 41408 Delwood Lane BAdd Suite 26, Panama City Remove Beach, FL 32408 Change 

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an effec ote: If	e date, if other than the date of filing: \( \textstyle \left( \left( \substyle \left( \left( \substyle \substyle \left( \substyle \left( \substyle \sin \sin \sin \sin \sin \sin \sin \sin
record is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
ated	Alm.
	Signature of a member or authorized representative of a member    Signature of a member
	• ,